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2016-2017 Report of the TADH Board Chair and President & CEO

It is a pleasure to present our report for the 2016-2017 Annual General Meeting of the Timmins and District Hospital (TADH).

TADH continues to be the cornerstone of healthcare activity within the City of Timmins, providing high quality services to local residents as well as patients throughout the Cochrane sub region. As the demand for service increases each year, TADH continues to recruit new physicians, thus increasing our capacity to access services closer to home.

The fiscal reality continues to be challenging. Provincial government budget restraints and inflationary increases in hydro and wages are factors over which we have no control. This makes balancing service demands against a frozen or declining amount of funding a difficult task. In 2016-17, we met that challenge and ended the fiscal year with an operating surplus. It is becoming evident to us that the ability of many healthcare organizations - including TADH to achieve a balanced position as an isolated organization is diminishing. Therefore, we will continue to seek partnerships with organizations with which we share mutual goals, with the intent of sharing or reducing costs. The objective of these partnerships is to have the right service, delivered in the right place by the most appropriate provider. We believe that partnerships can improve patients’ experience and outcomes through better patient-transitions and a more integrated approach to healthcare delivery.

In this report, we comment in detail about our community’s support of the TADH Foundation. We would be remiss if we did not highlight the tremendous work, and countless volunteer hours, that allow TADH to be the state-of-the-art facility it is today. Without the continued support of the Foundation we would not be able to maintain the level of service our community currently enjoys.

It has been an honour and a privilege to work with the exceptional and talented individuals committed to helping TADH achieve its vision of “exemplary care to Northerners.” Our sincere thanks go to the Board and its committees, staff committees, the tireless Auxiliary and Foundation volunteers, and the administrative, professional and medical staff of the Hospital. Together they make our Hospital a place where the residents of our communities truly feel they will receive the highest quality care available close to home.

This past year saw the Board and Hospital team take on a good deal of added work. The Board and staff worked closely on our new Strategic Plan, which will guide our decision making through 2021. In addition, the past year was an on-site accreditation year and the Hospital achieved the status of Accreditation with Commendation from Accreditation Canada. The Hospital was rated on 2300 individual criteria achieving a remarkable 99% level of compliance.
Other noteworthy achievements highlighted throughout the annual report include:

- Implementation of a Patient Experience Advisory Committee
- Introduction of Patient Family Engagement Lead
- Introduction of Discharge phone calls
- Opening of the Timmins Hospice Centre
- Introduction of a new Delivery Model for Child & Adolescent Mental Health
- Successful negotiations with our 3 bargaining units, ensuring continued labour stability
- Revised and improved violence prevention program.

We feel confident, notwithstanding the challenges, that with the continued support of the Hospital team, our community stakeholders, residents and the NE LHIN, the TADH will continue to meet the needs of our patients and their families.

We will continue to strive to achieve our Mission “Working together with our partners to improve the health of Northerners”

Blaise MacNeil
President & CEO

Maggie Matear
Board Chair
**Annual Medical Human Resources Sustainability Report**

2016/2017 presented several challenges to TADH, including to our Medical Staff as it relates to manpower needs.

We saw the departures of Dr. David Butters from Urology, and Dr. Mike Clark from Pediatrics who returned to practice in Ottawa. Dr. Dan Kelly from General Surgery relocated to BC, in part to pursue personal interests. Dr. Chris Steyn from Orthopedics has moved back to Southern Ontario, along with his spouse, Dr. Andrea Steyn from Anesthesia. During exit interviews, it was determined that TADH will continue to experience challenges in recruiting Orthopedic Surgeons because of uncertainties in the funding of joint replacement surgery. This uncertainty will also have ramifications on our ability to carry out emergency fracture surgery.

On the plus side, Dr. Ming Li has become a very valued member of our full time Family Medicine team after providing many years of physician assistant service. She has opened a full time family practice and provides service to the Hospitalist program. Dr. Ahmed Farrag is busy providing locum family medicine services throughout Northern Ontario while deciding on where his future will take him.

This summer will see the addition of Dr. Gabrielle Lambert and Dr. David Toupin to the Department of Family Medicine. Both will have completed their Family Medicine residency in Timmins and will be joining the Family Health Team and providing service to the Hospitalist program.

Obstetrics/Gynecology will be growing to four providers this fall with the addition of Dr. Kathryn Cossar from the Ottawa residency program.

Ophthalmology has welcomed a second member, Dr. Sohail Safi, to its service. He was recruited from Cornerbrook, Nfld. and brings his expertise to ophthalmology patients across the Northeast.

Orthopedics will likely be adding a new surgeon to provide foot and ankle surgery in addition to emergency trauma coverage later this year.

Dr. Paul Schulte is the newest full time radiologist, recruited from Regina. He brings with him a broad range of experience in all imaging modalities as well as advanced interventional radiology skills.

Dr. Gary Smith was named to the position of Chief of Neonatal and Pediatric Medicine. He is working hard on recruiting at least two full time pediatricians before the end of the year.
Fortunately, Health Force Ontario has been able to provide TADH with locum assistance so we can continue with largely ‘seamless’ on call coverage. Being locum dependent, however, has resulted in some gaps in coverage, occasionally leading to potentially serious outcomes. We continue to work towards having a Timmins based medical staff, with locums only being needed for ‘respite’ purposes and we will endeavor to have Timmins based providers for all specialties, including Pediatrics and Internal Medicine.

We also continue to look for ‘partners’ for ENT and Urology, as well as a replacement 3rd General Surgeon. NOSM has some good prospects, but unfortunately not for a few years.

TADH has worked both internally and with our LHIN partners to improve evidence based, quality focused, standardized medical order sets. We have now changed our collaborating partner to further facilitate the use of evidence based medicine while taking on the challenges of migrating our LHIN-wide EMR to Meditech 6.1 which will include “embedded” orders as part of computerized physician/provider order entry (CPOE).

I would also like to take this opportunity to thank Fran Zimmerman as well as Drs. Touw and Malo for their assistance on the Credential’s Committee.

The Medical Staff at Timmins and District Hospital will continue to provide exemplary care to the patients and families of Northern Ontario.
Executive

Chief of Staff and VP Medicine: Dr. Harry Voogjarv
Medical Staff President: Dr. Doug Arnold
Medical Staff Vice-President: Dr. Jaclyn Bernardi

Medical Directors

Emergency: Dr. John Chisholm/Dr. Jun Kim
Family Medicine: Dr. Mario Ciccone
Hospitalist Program: Dr. Stephen Morgan
Internal Medicine: Dr. Malvinder Parmar
Psychiatry: Dr. Bosah Nwosu
Surgical Program: Dr. David Hook
Continuing Care: Dr. David Hook
Diagnostic Imaging: Dr. Tim Richardson
Child & Adolescent Mental Health: Dr. Bode Akintan

Clinical Chiefs

- Obstetrics and Gynecology: Dr. Arul Raveendran
  Dr. Eric Labelle
- General Surgery: Dr. Robert Lafontaine
- Orthopedics: Dr. Gary Smith
- Neonatal & Pediatric Medicine: Dr. Rajkumar Vajpeyi
- Laboratory:
Community Partnerships

The Timmins and District Hospital (TADH) is a level B, greater than 100 beds, fully accredited (Accreditation Canada) referral and teaching hospital serving the residents of the City of Timmins and Cochrane District as well as the adjoining areas of the Temiskaming, Sudbury and Algoma districts. TADH is dedicated to providing health care services that are consistent with the needs of our community, community partners, and catchment area.
### Acute Care

**INTEGRATED MEDICAL SERVICES**
- Critical Care
  * Intensive Care
  * Internal Medicine
- Emergency Department
  * Trauma/ER medicine
- District Stroke Program
- Stroke Unit
- Acute Medical
- Hospice Centre: Palliative Care
- Complex Continuing Care
- Rehabilitation
- Assess and Restore
- Pediatrics

**INTEGRATED MENTAL HEALTH SERVICES**
- Child and Adolescent Unit
- Adult Mental Health Unit
- Outpatient Mental Health
- Crisis Team

**INTEGRATED SURGICAL SERVICES**
- General Surgery
- ENT
- Ophthalmology
- Orthopedic Surgery
- Urology
- Gynecology
- OR/Day Surgery/Endoscopy
- Minor Procedure Clinics
- Inpatient Surgical
- Maternal Child
  * Labour/Delivery/Postpartum

### Specialty and Ambulatory care

**DIAGNOSTIC IMAGING SERVICES**
- CT Scan
- MRI
- X-Ray
- Breast Screening
- Nuclear Medicine
- Bone Density
- Mammography
- Ultrasound

**OUTPATIENT PHYSIOTHERAPY SERVICES**

**NEPHROLOGY: DIALYSIS SERVICES**
- Hemodialysis/Peritoneal Dialysis

**ONCOLOGY SERVICES**

**CARDIOPULMONARY**
- EEG
- Stress Testing
- Respiratory Therapy
- Sleep lab
- Pediatric Asthma

**NORTH EAST JOINT ASSESSMENT CENTRE**

**TELEMEDICINE**

**SPECIALTY CLINICS**
- Dermatology
- Epilepsy
- Neurology
- Pacemaker
- Pediatric Development
- Pediatric Neurology
- Pediatric Complex Care
- Rheumatology
Timmins Hospice Centre Opens at TADH in February

In October 2016, the North East LHIN (NELHIN) Board Director, Denis Bérubé, announced that Timmins and District Hospital (TADH) will receive $420,000 annually for four hospice beds so that residents can live their remaining days in dignity and comfort, surrounded by the people who love them. With the support of the NELHIN, we initiated renovations, décor updates and equipment purchases in early December. The Timmins Hospice Centre admitted their first patients the week of February 27th. The Hospice Centre is an innovative model which integrates the strengths and expertise of palliative care in the community and the Hospital, building on existing hospital infrastructure.

Achievement of 99% of Accreditation Standards

TADH very successfully completed the Accreditation Canada Qmentum Program process in September with the outstanding achievement of 99% of the quality dimension standards/2242 out of 2267 standards were achieved.

Patient Experience Advisory Committee

The Patient Experience Advisory Committee was formed in 2016-17 with the purpose of serving in an advisory capacity and to make recommendations on matters that impact the experience of patients and their families at our hospital. Some key responsibilities of the committee will be to actively promote and create opportunities for communication, collaboration and partnering among patients, families and staff, and to identify and support opportunities for improvement within TADH from the patient and family perspective.

ER Performance Improvement

To finish off the 2016 Pay for Results year, TADH ended up ranked 19th out of 73 Pay for Results hospitals in Ontario from a Performance Ranking Perspective. Amongst its peer group, Medium-Volume facilities, TADH was 6th of 12 hospitals. Over $1,000,000.00 in funding was received to support continued patient flow enhancement initiatives including 5 surge capacity beds on the Integrated Medical Unit.
Quality in Motion-changes/Patient Safety and Quality Leadership
Walkabouts
Changes are made every day that positively impact the work environment and contribute to the improvement of patient safety and quality. Some changes may include developing new processes, changing processes, improving communication, or developing supports such as a visual aid. The Senior Leadership Team in collaboration with the Directors of Quality and Performance Improvement and MH and Director Surgical and Special Services introduced the monthly Patient Safety and Quality Leadership walkabouts where there were a total of 77 concerns raised by staff and 53 were achieved with short term goals and 24 with long term action plans.

Patient Engagement Lead Role and Discharge Phone Calls Introduced
TADH welcomed Kathy Dunbabin RPN to a new role as Patient Engagement Lead. Kathy completes daily patient satisfaction surveys, and follows up with discharged patients with a discharge phone call. Kathy steadily increased the number of calls. 75.4% of all discharged patients received a call within 48 hrs. of discharge for Q4 of 16/17.

Dr. Hans Verbeek Nursery
The TADH nursery was named the “Dr. Hans Verbeek Nursery” as a result of a motion from the TADH Board and the Porcupine Medical Society, honouring Dr. Verbeek’s over 50 years in practicing medicine including pediatrics, pathology, allergy and skin disorders medicine.

Provincial Digital Quality Based Procedure (QBP) Digital Order Sets Program
TADH has been participating in the Provincial Digital QBP Order Sets program since July 2016 with a goal to facilitate and enhance evidence based best practice at the point of care. The NELHIN and TADH worked with Think Research to develop a group of 14 order sets with a targeted June 1st implementation. The Meditech 6.1 Care Provider Order Entry (CPOE) project is currently underway in the NELHIN. Regional order sets and standardized charting process design will be developed to standardize evidence based care across the NELHIN.
Nephrology Program
TADH submitted a proposal for funding for a home hemodialysis program. We will also collaborate with ORN to increase living donor kidney transplant by 20% provincially over the next four years with our patient ambassador for this initiative Christopher Chilton.

Recruitment of Second Ophthalmologist
Dr. Safi joined our surgical team in December 2016 and started performing surgeries in January 2017. For the past 5 years, the average of cataract procedures performed has been 547. With the addition of Dr. Safi, for the last quarter of 2016/17, TADH completed a total of 749 cataract surgeries this 2016/17 fiscal year.

Introduction of Automated External Defibrillators (AEDs)/new defibrillators/training
Our goal is to ensure that defibrillation occurs within 3 minutes of found downtime. To enable us to obtain this goal an equipment upgrade has occurred to ensure all defibrillators have an AED (automated external defibrillator) mode and that all staff have received training to ensure that electricity can be delivered prior to the code team arrival.

Stroke Program
The Integrated Stroke Unit (ISU) has been operating since April 11, 2016 and admitted 87 patients into acute stroke accounts and 45 patients into rehab stroke accounts. Of the 45 admitted stroke rehab patients, 20 were transitioned from the acute stroke account without changing beds. Stroke was the main diagnosis for approximately 43% of all rehabilitation admissions. More people received the clot-busting drug tPA in 2016/17 (18), than in 2015/16 (16) and 2014/15 (9). The “Door-to-Needle Quality Improvement Project” was undertaken to ultimately lower the time in which eligible patients receive tPA, as it is well understood that “time is brain”.

Trillium Gift of Life
TADH ICU team has worked closely with the Trillium Gift of Life program to save and enhance the quality of 7 lives through organ donation and retrieval at our hospital. Through their outstanding commitment:
• 2 individuals received livers
• 2 individuals received kidneys
• 2 more individuals received a kidney/pancreas transplant
• 1 individual received a heart transplant

In addition there were 19 eye donors and 2 multi-tissue donors.
**Child and Adolescent Mental Health Unit Successful New Model**

In collaboration with Dr. Akintan and the Child and Adolescent MH leadership team at Hamilton Health Sciences, TADH completed a successful implementation and positive six-month review of the program. Improvements include enhanced daily psychiatry supports through telemedicine and increased staff training, policy/documentation and role development.

"Thank you to the caring support and outstanding commitment to excellence in care from the TADH Board of Directors, leadership team, and all members of the health care team."

- Joan Ludwig

Note: James Bay activity accounts for approximately 10% of total volumes; increased from 3% in 14-15)
**Human Resources**
The hospital continues to “Maximize on the Potential of our People” by providing a supportive, safe, cost effective environment that fosters organizational and personal growth. A high performing work environment providing quality care to patients that welcomed 25 registered Nurses and 15 Registered Practical Nurses in 2016-17 to our already 850 engaged professionals.

**PHYSICIAN RECRUITMENT**

**Learners:**
Our active involvement with the Northern Ontario School of Medicine (NOSM) continues through the Comprehensive Community Clerkship and the Family Medicine Residency Programs. Eight third year medical students successfully completed their clerkship year in Timmins, working with our primary care providers in a clinic setting and gaining exposure to many specialties through rotations with our various specialists. The relationships they develop with preceptors plays an invaluable role in not only helping them decide on which residency program they would like to pursue, but also in which community they choose to practice.

Through the Residency Matching service, Timmins was very fortunate to match all four family medicine residency spots in the first round and we look forward to welcoming these four new learners at the beginning of July, 2017.

We remain hopeful that we will also have success with recruitment of a Child and Adolescent Psychiatrist.

The Foundation, through its tireless efforts to raise funds for replacing obsolete or purchasing new state of the art equipment, has always played a vital role in helping to recruit and retain specialist physicians to TADH. TADH can be justly proud of its excellent team of medical practitioners who dedicate themselves in delivering exemplary patient centered care to the residents of our coverage area.
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<th>Board Members</th>
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<td>Maggie Matear</td>
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<td>David Thomas</td>
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<td>Gaétan Malette</td>
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<td>Iain Martin</td>
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<td>Léon Laforest</td>
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<td>Blaise MacNeil</td>
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<td>Dr. Harry Voogjarv</td>
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<td>Dr. Doug Arnold</td>
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<td>Dr. Jaclyn Bernardi</td>
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<td>Joan Ludwig</td>
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<tr>
<td>Sue Perras</td>
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<td>Nancy Pandolfi</td>
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<td>Robert Perrault</td>
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<td>Rachel Cull</td>
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<td>Sylvie Petroski</td>
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<tr>
<td>Marylin Wood</td>
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<tr>
<td>Alex Szczebonski</td>
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<tr>
<td>Steve Black</td>
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<tr>
<td>Ivor Jones</td>
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<td>Sarah Campbell</td>
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Timmins and District Hospital Annual Report 2016-2017
Hospital Infrastructure Renewal Highlights

Chemistry Analyzers
The Chemistry Analyzers in the Hospital’s Laboratory were replaced towards the end of 2016/17. Over 725,000 diagnostic tests are performed on these Analyzers on an annual basis. The new units will provide quicker results and provide capacity for any growth in volumes.

MRI
Our 13-year old Magnetic Resonance Imaging (MRI) unit was approved for replacement. Planning for the replacement was conducted during the latter part of 2016-17 with the work starting just as we finished the fiscal year. The new MRI unit will help to both lower the length of time for the MRI exam and lower the radiation dose.

IV Pumps
Our fleet of Intravenous (IV) Pumps have exceeded their useful life. These pumps are used to administer various forms of fluids and medications to patients throughout the Hospital. During 2016/17, Board approval was given to replace our entire fleet of over 150 IV Pumps. The new pumps will provide up-to-date technology for IV administration along with improvements in medication error protection. The new pumps are expected to be in full operation towards the end of the 2017 calendar year.

All of the renewal projects shown above were made possible through the generosity of everyone who has supported the Hospital Foundation.

Hospice Centre
With the assistance of the NE LHIN, the Hospital converted space on the second floor to a 4-bed Hospice Centre which also includes a family comfort/resting area. The area was designed and decorated to provide a peaceful and calming environment during a patient’s remaining days.
**Hospital Financial Status**
This past fiscal year of 2016/17 has been another year where we have struggled to complete the year in a balanced or better position. Despite revenue increases of about $1.8 million, with some significant cost increases on our non-compensation expenses, it was difficult to hold onto a year end surplus from operations of $11,429.

The lack of a notable operating surplus has only increased our financial challenges surrounding working capital improvement, capital equipment and building infrastructure investment and long-term debt obligations. We must steer our focus to long-term financial planning in order to address these challenges.

**Funding Reform**
We are now entering the fifth year of the Province’s hospital funding reform. The apparent instability of the funding allocation from the Health-Based Allocation Model (HBAM) continues to pose difficulties in developing stable annual operating budgets. In addition, there is difficulty in establishing confirmed funding allocations related to Quality-Based Procedures (QBPs) that are based on the Hospital’s capacity for volumes. The table below provides an overview of the numbers of QBPs for the last two years:

![Bar Chart]

**2016-17**
- C/O U: 120
- Congestive Heart Failure: 110
- Stroke (All Local): 100
- Pneumonia: 90
- Neurological: 80
- Minimally Invasive: 70
- Obstetrics: 60
- Hip Fracture: 50
- Joint Replacement: 40
- No Elective: 30

**2015-16**
- C/O U: 130
- Congestive Heart Failure: 120
- Stroke (All Local): 110
- Pneumonia: 100
- Neurological: 90
- Minimally Invasive: 80
- Obstetrics: 70
- Hip Fracture: 60
- Joint Replacement: 50
- No Elective: 40
# TADH Statement of Operations

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<td><strong>Revenues</strong></td>
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<td>Ministry of Health and Long Term Care/Local Health Integration Network</td>
<td>71,205,250</td>
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<tr>
<td>Cancer Care Ontario</td>
<td>4,738,277</td>
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<td>Patient services</td>
<td>0,404,200</td>
<td>0,595,552</td>
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<tr>
<td>Room differential and copayments</td>
<td>1,507,605</td>
<td>1,622,158</td>
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<tr>
<td>Recoveries and other revenue</td>
<td>7,408,488</td>
<td>7,600,901</td>
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<tr>
<td>Amortization of deferred equipment contributions</td>
<td>1,810,413</td>
<td>1,408,686</td>
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<tr>
<td>Uniquely funded programs</td>
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<td>3,163,296</td>
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<tr>
<td><strong>Total Revenues</strong></td>
<td>98,514,081</td>
<td>97,888,118</td>
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| **Expenses**         |            |            |
| Salaries and wages   | 44,950,239 | 44,754,041 |
| Benefits contributions | 13,128,964 | 13,632,663 |
| Medical staff remuneration | 12,145,263 | 12,093,149 |
| Medical and surgical supplies | 4,793,269 | 4,538,529  |
| Drugs and medical gases | 3,057,973  | 2,995,183  |
| Other supplies and expenses | 13,585,410 | 13,207,708 |
| Amortization of equipment | 2,469,702 | 2,101,182  |
| Uniquely funded programs | 3,075,827 | 3,163,296  |
| **Total Expenses**   | 98,502,652 | 96,842,456 |

**Excess/(Deficiency) of Revenue over Expenses from Hospital Operations**

|                      | 11,429     | 1,045,662  |
| Amortization of deferred building contributions | 2,230,435 | 2,216,535  |
| Amortization of building                         | (9,697,814) | (9,381,809) |
| Interest on long-term debt                       | (434,011)  | (291,669)  |
| Loss on disposal of buildings                    | -          | -          |
| **Total Excess/(Deficiency) of Revenue over Expenses** | (890,001) | 289,269     |
Financial Health

Value of Net Assets

- 2012/13: ($13,851,553)
- 2013/14: ($13,784,692)
- 2014/15: ($13,495,423)
- 2015/16: ($13,885,424)
- 2016/17: ($10,780,031)

Working Capital Position

- 2012/13: ($11,121,627)
- 2013/14: ($5,953,370)
- 2014/15: ($2,995,012)
- 2015/16: ($8,531,916)
- 2016/17: ($4,441,670)

Hospital Activity Highlights

2016-17

- Inpatient Surgeries: 1,722
- Day Surgeries: 3,689
- Endoscopy Procedures: 4,383
- Hemodialysis Treatments: 1,992
- Chemotherapy Treatments: 920
- CT Scans: 3,353
- MRIs: 9,722

2015-16

- Inpatient Surgeries: 1,685
- Day Surgeries: 3,340
- Endoscopy Procedures: 4,441
- Hemodialysis Treatments: 3,200
- Chemotherapy Treatments: 983
- CT Scans: 10,823
- MRIs: 10,466
To read any of TADH’s Media Releases please visit our website at www.tadh.com under “Latest News”.

2016-2017 Media Releases

May 2016
~ Study shows value of navigator program for Stroke patients
~ TADH says thanks to Doctors on Doctors’ Day
~ Nursing week
~ Mammothon

June 2016
~ TADH Board of Directors elects New Board Chair
~ TADH highlights improvement in Stroke program performance

September 2016
~ TADH Welcomes learners from the NOSM

February 2017
~ Patient Choice Award

March 2017
~ TADH National Colorectal cancer month
~ TADH support patient experience advisory committee & patient family engagement lead
~ TADH Hospice Centre grand opening
~ TADH Recognizes Dr. Hans Verbeek by naming the Nursery “The Dr. Hans Verbeek Nursery”

Facebook:  www.facebook.com/Timmins and District Hospital Hospital/L’Hôpital de Timmins et du district
Twitter:  @TADHospital
YouTube:  Timmins and District Hospital Hospital/L’Hôpital de Timmins et du district
LinkedIn:  Timmins and District Hospital Hospital/L’Hôpital de Timmins et du district
Website:  www.tadh.com
∞ Like, follow, and subscribe to our social media channels! ∞
The Timmins and District Hospital Foundation raises funds for medical equipment for TADH beyond those available from other sources. We are committed to our donors and to providing the best healthcare possible through fundraising activities and programs to support the acquisition of capital equipment, major renovations, and future building expansion.

The ongoing generosity of Foundation donors allows the Timmins and District Hospital to recruit and retain much-needed medical specialists as well as purchase the latest technology. Every gift we receive lets us know that we are not alone in our mission to provide the best care to the residents of our District and surrounding area which they have come to expect and deserve.

In May 2013, the Timmins and District Hospital Foundation launched its most ambitious campaign to date with a goal of $15 million. The renovation and relocation of eight different departments at a cost of $2.6 million and the replacement of $12.4 million worth of equipment will be the end result of the 2013-2016 Capital Campaign – Building for tomorrow’s healthcare today.

We are pleased to report that we have successfully obtained our goal, and raised more than $15 million thanks to Foundation fundraising programs and events, significant gifts from the TADH Auxiliary and pledges from corporations, physicians and individuals. Transfers of $1,899,086 were directed to the Timmins and District Hospital in 2016 for the purchase of equipment and delivery of programs. The total accumulated transfers to the hospital since the Foundation’s inception total $38,153,057.

Thank you to our Capital Campaign Chair, Jean-Paul Aubé and his cabinet; Gabriel Provost, Dave McGirr and Don Wyatt for leading this incredible project.

The Foundation’s success would not be possible without the hard work and dedication of the staff, volunteers and board members. The Timmins and District Hospital Foundation staff members include Janna Burke, Executive Director, Patricia Gaudreau, Assistant Executive Director, and Jennifer Bentley, Administrative Assistant.

It has been said that TADH is a big city hospital in a rural setting. Our hospital’s dedicated staff is proud to provide the quality of care normally expected in a large urban centre. In order to continue to offer such excellent care, we must have the active financial support of our communities. You and everyone you hold most dear deserve a big city hospital in the heart of the North. We thank you for your continued support and generosity.

“Together we are “Building for tomorrow’s healthcare today!”
TADH Volunteer & Pastoral Care Services

The Volunteer Services department is comprised of over 80 men and women who give back to their community by volunteering. They are involved in almost every area of the organization; helping staff perform various tasks and contributing to a higher quality of care to our clients.

In order to thank all of our volunteers for their hard work and contribution to TADH, Volunteer Services hosted the annual Volunteer Appreciation Luncheon on June 29th, 2016 in the lecture theatre. During the event, VP People/Director of Operations Mike Resetar reminded volunteers how their help and dedication to the hospital is invaluable and appreciated. TADH officially recognized 27 volunteers who received awards for reaching new hours and years of service milestones. Among the celebrated volunteers, medical unit volunteer Aline Brochu received an award for completing 10,000 hours of volunteer service! Maternity volunteer and champion of TADH’s Snuggles and Cuddles program Mary Monaghan was recognized for her 25 years of service! Award recipients also included Carol Caldwell (Fracture Clinic Volunteer) for 20 years of volunteer work; Claire Bouley (Information Desk Volunteer) for 4300 hours; Helen Raittinen (Oncology volunteer) for 15 years of service and Gerry Kenny (Oncology and Dialysis volunteer), who completed 2000 hours in 5 years of service!

Pastoral Care Services at TADH is also an active department with approximately 75 volunteer clergy and lay spiritual care providers who care about holistic health and the spiritual well-being of our patients and staff. Our statistics indicate that our team of volunteers provided 9087 recorded pastoral visits in the 2016-2017 fiscal year!

The pastoral care team continues to deliver many spiritual programs and special services throughout the year such as the annual memorial service and religious celebrations. The pastoral care appreciation luncheon was also held on December 14th. Deacon Michel Néron was honored during the event as the recipient of this year’s Pastoral Care Clergy of the Year Award for delivery of outstanding spiritual care.

On behalf of all hospital units and areas that are serviced by these dedicated volunteers, I extend to them our warmest gratitude for the selfless gift of their time for our patients and their families!
Auxiliary Annual Report

In the past year, the TADH Auxiliary continued to be very active as we operate the Gift Shop, sold Nevada tickets in the Promenade and items from the Tuck Wagon on several floors. Fundraising events were held throughout the year that included bake sales, book and craft sales, knitting, draws, and bazaars. We provided comfort kits and chemo caps to patients battling breast cancer and emergency kits for parents without families. A knitting program has been added to our endeavors; patients receiving treatment in the Oncology unit and Fracture clinic can knit while they are waiting for their treatment. Their knitting is gathered to create a quilt by an Auxiliary volunteer, which will then be donated to either the Oncology Unit or the Dialysis Unit. In addition, the Auxiliary volunteers put a lot of time and effort into making Christmas and Easter favours, selling fabrics, wools, books, and send personalized cards. At present, we have 106 members, 40 of whom are presently active in Auxiliary activities and 36 are provincial and life members.

Notable Moments and Events Throughout 2016-2017

♦ The TDH Auxiliary sold daffodil pins for the Canadian Cancer Society.
♦ It was reported that proceeds generated from the Spring Bazaar amounted to $2,672.20.
♦ An Award Presentation honoured Auxiliary members with pins and certificates.
♦ Knitted items are now on sale in the main foyer once a week.
♦ Annual fall bazaar generated $2,391.00. Sales for the Gift that day amounted to $1,836.85
♦ The Auxiliary was presented with a $500 check from the RBC Royal Bank Retiree Volunteer Program.
♦ Nancy Pandolfi, Annette Gélinas, and Shirley Deleurant presented a check to the Timmins and District Hospital Foundation in the amount of $80,000.
♦ It was noted that Auxiliary members provided a total of 10,204 volunteer hours.
♦ It was further noted that to date the Auxiliary has donated over $1.5 million to the Timmins and District Hospital.
♦ It was announced that the Christmas Draw generated $1,423.00.

The members of the TADH Auxiliary enjoy the contribution they are making towards the betterment of health care. The highlight of our endeavours occurred in December when we provided a check to the Timmins and District Hospital Foundation for equipment needed at TADH. We are grateful for the Hospital CEO Blaise MacNeil and his staff who continue to make our presence and our efforts appreciated.
MISSION

Working Together with our Partners to Improve the health of Northerners

VISION

Exemplary Care to Northerners

STRATEGIC DIMENSIONS

~ Optimize Care within our Northern Communities
~ Maximize the potential of our People
~ Harness & Advance Technological Enablers
~ Achieve Financial Sustainability